1224792

FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number
Expires:
Estimated average burden
hours per response

SE	C USE ON	LΥ			
Prefix		Serial			
DATE RECEIVED					

Name of Offering () check if this is an am Preferred Stock and Debt Financing	nendment and name has changed, and indicate ch	ange.)
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 Ru	ule 506 Section 4(6) ULOE
Type of Filing: New Filing Ar	nendment	
	A. BASIC IDENTIFICATION DATA	<u> </u>
1. Enter the information requested about the is	suer	
· · · · · · · · · · · · · · · · · · ·	endment and name has changed, and indicate char	nge.)
Who's Calling, Inc. Address of Executive Offices 5210 Carillon Point, Kirkland, Washington	(Number and Street, City, State, Zip Coo	de) Telephone Number (Including Area Code) (800) 579-1791
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Co.	de) Telephone Number (Including Area Code)
Brief Description of Business Advertising Tracking Services		RECEIVED
Type of Business Organization Corporation	limited partnership, already formed	MAR 2 5 2010er (please specify):
business trust	limited partnership, to be formed	
Actual or Estimated Date of Incorporation or C	Month Year Organization: 12 97	Actual PROCESSED
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service Abbrevia CN for Canada; FN for other foreign jurisdict	
GENERAL INSTRUCTIONS		THOMSON

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), PARCIAL 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information req	uested for the foll	owing:			
 Each promoter of th 	e issuer, if the iss	uer has been organized wi	thin the past five years;		
 Each beneficial ow securities of the issu 		power to vote or dispos	e, or direct the vote or	disposition of, 10	0% or more of a class of equity
Each executive office	er and director o	f corporate issuers and of o	corporate general and mana	ging partners of p	partnership issuers; and
 Each general and m 	anaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Benson, Lonnie	if individual)				
Business or Residence Addre 5210 Carillon Point, Kirkla		Street, City, State, Zip Coo	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Fine, Dan	if individual)				
Business or Residence Addre 22450 Dogwood Lane, Edn			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Horton, Dan	if individual)				
Business or Residence Address 5210 Carillon Point, Kirkla		Street, City, State, Zip Coo	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Krueger, Robin	if individual)				
Business or Residence Address 210 Carillon Point, Kirkla		Street, City, State, Zip Co.	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Moran, Paul	if individual)				
Business or Residence Addr 5210 Carillon Point, Kirkla		Street, City, State, Zip Co.	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Spangler Ventures Ten, Ll					
Business or Residence Addr 2802 – 10 th Avenue E., Seat		Street, City, State, Zip Co.	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Stapleton, John	if individual)				
Business or Residence Addr 3190 High Point Drive, Ch			de)		

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner **Executive Officer** Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Van Tuyl, Cecil Business or Residence Address (Number and Street, City, State, Zip Code) 8500 Shawnee Mission Parkway, Merriam, Kansas 66202 Promoter Beneficial Owner **Executive Officer** Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Van Tuyl, Larry Business or Residence Address (Number and Street, City, State, Zip Code) 1550 E. Missouri, Suite 300, Phoenix, AZ 85014 Executive Officer Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Wright, Fred Business or Residence Address (Number and Street, City, State, Zip Code) 5210 Carillon Point, Kirkland, WA 98033 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner **Executive Officer** Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) **Executive Officer** Director Check Box(es) that Apply: Promoter Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

				В. І	NFORMAT	TION ABO	UT OFFER	ING				
											Yes	No
I. Has th	ne issuer sold	l, or does the	e issuer inter	id to sell, to	non-accred	ited investor	rs in this offi	ering?	***************************************	.,		\boxtimes
• 117			wer also in A	• •	-	•					050.0	00
2. What	is the minim	um investm	ent that will	be accepted	I from any ir	idividual?	*********				<u>\$50,0</u> Yes	
3. Does	the offering	permit joint	ownership o	f a single u	nit? .				******************			No
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simila associ dealer	the informat ir remunerati lated person . If more that at broker or of	on for solici or agent of a an five (5) p	itation of pur a broker or d	chasers in c ealer registe	connection wered with the	ith sales of SEC and/o	securities in r with a state	the offering e or states, li	g. If a perso st the name	n to be listed of the broke	d is an er or	
Full Name	e (Last name	first, if indi	ividual)									
Business (or Residence	Address (N	lumber and !	Street City	State Zin C	'ode)				_		
Name of A	Associated B	roker or De	aler									
States in V	Which Perso	n Listed Has	s Solicited o	r Intends to	Solicit Purc	hasers						
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Business	or Residence	Address (N	Number and	Street, City,	State, Zip C	Code)						
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Business	or Residence	e Address (r	number and	Street, City,	State, Zip C	Lode)						
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Name of	Associated E	Broker or De	aler									
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt *		\$1,500,000
Equity	\$9,000,000	\$1,500,000
Common Preferred		
Convertible Securities (including warrants)		<u>\$0</u>
Partnership Interests		<u>\$0</u>
Other (Specify)		<u>\$0</u>
Total		\$3,000,000
Answer also in Appendix, Column 3, if filing und Enter the number of accredited and non-accredited investors wh offering and the aggregate dollar amounts of their purchases. For o	o have purchased securities in this fferings under Rule 504, indicate the	
number of persons who have purchased securities and the aggrega on the total lines. Enter "0" if answer is "none" or "zero."	te dollar amounts of their purchases Number	Aggregate Dollar Amount
	Investors	of Purchases
Accredited Investors	1	\$3,000,000
Non-accredited Investors	0	\$0
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing und	der ULOE.	
If this filing is for an offering under Rule 504 or 505, enter the insold by the issuer, to date, in offerings of the types indicated, in the sale of securities in this offering. Classify securities by type listed in	twelve (12) months prior to the first 1 Part C - Question 1.	Dellon America
sold by the issuer, to date, in offerings of the types indicated, in the sale of securities in this offering. Classify securities by type listed in	twelve (12) months prior to the first a Part C - Question 1. Type of	Dollar Amount Sold
sold by the issuer, to date, in offerings of the types indicated, in the	twelve (12) months prior to the first n Part C - Question 1. Type of Security	Sold
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^{*} The debt security sold is a promissory note that is convertible into capital stock of the issuer under certain circumstances.